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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: William A. Cline, Michael R. Bonner
Serial No.: 10/536,765
Filing Date: May 26, 2005
Art Unit/Examiner unknown/unknown

CERTIFICATION OF FACSIMILE TRANSMISSION

Sir:

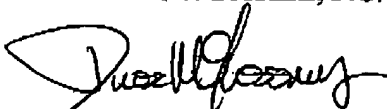
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I hereby certify that this correspondence was transmitted via Facsimile to (571)273-8300 on December 6, 2005.

Respectfully submitted,

YOUNG & BASILE, P.C.



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Dated: December 7, 2005
DMG/ljo

PTO/SB/82 (04-05)

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**REVOCATION OF POWER OF
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NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/536,765
Filing Date	26 May 2005
First Named Inventor	William A. Cline
Art Unit	Unknown
Examiner Name	Unknown
Attorney Docket Number	48456-0040 SSY-105-B

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR--

☒ I hereby appoint the practitioners associated with the Customer Number: 32299

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with
Customer Number:

48980

OR

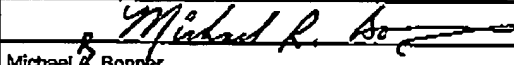
<input checked="" type="checkbox"/> Firm or Individual Name	Young & Basile, PC				
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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature			
Name	Michael R. Bonner		
Date	11/22/05	Telephone	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 2 forms are submitted.

This collection of information is required by 37 CFR 1.35. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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**REVOCATION OF POWER OF
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CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/536,765
Filing Date	26 May 2005
First Named Inventor	William A. Cline
Art Unit	Unknown
Examiner Name	Unknown
Attorney Docket Number	48466-0010 55Y-105-B

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:

32299

☒ Please change the correspondence address for the above-identified application to:☒ The address associated with
Customer Number:

48980

OR

☒ Firm or
Individual Name

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Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature



Name

William A. Cline

Date

11.2.05

Telephone

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